

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Jessica Horan-Kunco</i>						
STREET ADDRESS <i>439 West Arlington Rd.</i>						
CITY <i>Erie</i>		STATE <i>PA</i>		ZIP CODE <i>16509</i>		
TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input type="checkbox"/> ANNUAL REPORT <input checked="" type="checkbox"/>	NAME OF OFFICE SOUGHT BY CANDIDATE <i>City Council</i>		DISTRICT NO. <i>25</i>	PARTY <i>Dem</i>		DATE OF ELECTION
						MO. DAY YEAR
						<i>11 8 11</i>
	DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY	
	MO. DAY YEAR		MO. DAY YEAR		2018 JAN 18 PM 12:50 ERIE COUNTY VOTER REGISTRATION <i>KA</i>	
	<i>1 1 17</i>		<i>12 31 17</i>			
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0.00</i>					
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0.00</i>						
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <i>18th</i> DAY OF <i>January</i> 20 <i>18</i> <i>Kimberly Alexander</i> SIGNATURE MY COMMISSION EXPIRES <i>10 31 2019</i> MO. DAY YR.		<i>Jessica Horan-Kunco</i> SIGNATURE OF PERSON SUBMITTING REPORT <i>Jessica Horan-Kunco</i> PRINTED NAME <i>814</i> <i>454-0587</i> AREA CODE DAYTIME TELEPHONE NUMBER	
--	--	---	--

NOTARIAL SEAL
 Kimberly S. Alexander, Notary Public
 State of Erie, Erie County
 My Commission Expires Oct. 31, 2019
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20____ _____ SIGNATURE MY COMMISSION EXPIRES _____ MO. DAY YR.		SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE DAYTIME TELEPHONE NUMBER	
--	--	--	--